Case 16-29481 Doc 1 Filed 09/15/16 Entered 09/15/16 16:22:22 Desc Main Document Page 1 of 54

| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|----------|--|--|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is on | Nicole | | |
| | your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your | First name | First name | |
| | | Middle name | Middle name | |
| | | Minter | | |
| | meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| | | | | |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of | | | |
| . | your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-5980 | | |

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Case number (if known)

Debtor 1 Nicole Minter

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|---|---|---|--|--|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) | | |
| | EINS | EINs | | |
| Where you live | 702 W 61st Place | If Debtor 2 lives at a different address: | | |
| | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | County | County | | |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINS Where you live 702 W 61st Place Chicago, IL 60621 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Why you are choosing this district to file for bankruptcy Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. | | |

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Case number (if known) Debtor 1 Nicole Minter

| ₽ar | Tell the Court About | our Ba | ankruptcy Ca | ise | | | | |
|-----|--|--|----------------|--|--|---|-----|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | ach, see <i>Notice Required by</i> ge 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankrup e box. | tcy | |
| | choosing to file under | ■ Chapter 7 | | | | | | |
| | | ☐ Chapter 11 | | | | | | |
| | | ☐ Ch | apter 12 | | | | | |
| | | ☐ Ch | apter 13 | | | | | |
| | | | | | | | | |
| 3. | How you will pay the fee | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | | |
| | | | | the fee in installne in Installments (O | | on, sign and attach the Application for Individuals to | Pay | |
| | | | I request tha | t my fee be waived | (You may request this option | n only if you are filing for Chapter 7. By law, a judge | | |
| | | | applies to you | ur family size and yo | ou are unable to pay the fee in | ur income is less than 150% of the official poverty lininstallments). If you choose this option, you must ficial Form 103B) and file it with your petition. | | |
|). | Have you filed for bankruptcy within the | ■ No. | | | | | | |
| | last 8 years? | ☐ Yes | S. | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy | ■ No | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | | | |
| | aiilliate: | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | | | | | | |
| 11. | Do you rent your residence? | □ No. | . Go to l | ine 12. | | | | |
| | residence : | Yes | s. Has yo | ur landlord obtained | d an eviction judgment agains | t you and do you want to stay in your residence? | | |
| | | | | No. Go to line 12. | | | | |
| | | | | Yes. Fill out <i>Initial</i> bankruptcy petition | | Judgment Against You (Form 101A) and file it with the | his | |
| | | | | | | | | |

| Deb | otor 1 Nicole Minter | | | Document | Page 4 of 54 | Case number (if known) | |
|-----|--|-------------------------|---|-------------------------------|------------------------|--|--|
| Par | t 3: Report About Any | Businesses | You Owr | as a Sole Proprietor | | | |
| 12. | Are you a sole proprieto of any full- or part-time business? | or ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of business | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | | | |
| | If you have more than on sole proprietorship, use a separate sheet and attac | <u>l</u> | Numb | er, Street, City, State & ZIP | Code | | |
| | it to this petition. | | Chec | k the appropriate box to desc | cribe your business: | | |
| | | | | Health Care Business (as | defined in 11 U.S.C. § | § 101(27A)) | |
| | | | | Single Asset Real Estate (| as defined in 11 U.S.0 | C. § 101(51B)) | |
| | | | | Stockbroker (as defined in | 11 U.S.C. § 101(53A | | |
| | | | | Commodity Broker (as def | ined in 11 U.S.C. § 10 | 01(6)) | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and a you a small business debtor? | deadline re operatio | rou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process 11 U.S.C. 1116(1)(B). | | | | |
| | For a definition of small | ■ No. | I am i | not filing under Chapter 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | am NOT a small busi | ness debtor according to the definition in the Bankruptcy | |
| | | ☐ Yes. | I am f | iling under Chapter 11 and I | am a small business | debtor according to the definition in the Bankruptcy Code. | |
| Par | t 4: Report if You Own | or Have An | y Hazardo | ous Property or Any Prope | ty That Needs Imme | ediate Attention | |
| 14. | Do you own or have an | | | | | | |
| | property that poses or i alleged to pose a threat of imminent and identifiable hazard to | S | What is | the hazard? | | | |
| | public health or safety? Or do you own any property that needs | | If immed | liate attention is | | | |
| | immediate attention? | | needed, | why is it needed? | | | |

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs

urgent repairs?

Debtor 1 Nicole Minter Page 5 of 54 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Nicole Minter | | Docum | | number (if known) | | |
|------|--|--|---|--|---|-------|--|
| Part | 6: Answer These Quest | ions for Rep | oorting Purposes | | | | |
| 16. | What kind of debts do you have? | 16a. <i>i</i> | Are your debts primarily on dividual primarily for a pe | consumer debts? Consumer debts a rsonal, family, or household purpose. | are defined in 11 U.S.C. § 101(8) as "incurred by | an an | |
| | | ſ | ☐ No. Go to line 16b. | | | | |
| | | I | Yes. Go to line 17. | | | | |
| | | | | business debts? Business debts are vestment or through the operation of | | | |
| | | Ī | ☐ No. Go to line 16c. | | | | |
| | | ſ | ☐ Yes. Go to line 17. | | | | |
| | | 16c. S | State the type of debts you | owe that are not consumer debts or | business debts | | |
| 17. | Are you filing under Chapter 7? | □ No. I | am not filing under Chapte | er 7. Go to line 18. | | | |
| | Do you estimate that after any exempt property is excluded and | | | . Do you estimate that after any exemavailable to distribute to unsecured cr | pt property is excluded and administrative expeeditors? | nses | |
| | administrative expenses | ſ | □ No | | | | |
| | are paid that funds will be available for | | Yes | | | | |
| | distribution to unsecured creditors? | | _ 103 | | | | |
| 18. | How many Creditors do | ■ 1-49 | | □ 1,000-5,000 | ☐ 25,001-50,000 | | |
| | you estimate that you owe? | ■ 1-49 | | ☐ 5001-10,000 | ☐ 50,001-100,000 | | |
| | owe: | □ 100-199 |) | □ 10,001-25,000 | ☐ More than100,000 | | |
| | | 200-999 |) | | | | |
| 19. | How much do you | □ \$0 - \$50 |),000 | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | |
| | estimate your assets to be worth? | | - \$100,000 | □ \$10,000,001 - \$50 million | | | |
| | be worth. | | 01 - \$500,000 | □ \$50,000,001 - \$100 millio | | | |
| | | □ \$500,00 | 01 - \$1 million | □ \$100,000,001 - \$500 mill | ion | | |
| 20. | How much do you | □ \$0 - \$50 | | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | |
| | estimate your liabilities to be? | | 1 - \$100,000 | □ \$10,000,001 - \$50 million | | | |
| | | | 01 - \$500,000 | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | | | |
| | | □ \$500,00 | 01 - \$1 million | □ \$100,000,001 - \$500 mili | on 🗀 More than \$50 billion | | |
| Part | :7: Sign Below | | | | | | |
| For | you | I have exa | mined this petition, and I de | eclare under penalty of perjury that th | e information provided is true and correct. | | |
| | | | | | eligible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7. | | |
| | | | | d not pay or agree to pay someone which the notice required by 11 U.S.C. § 34. | no is not an attorney to help me fill out this 2(b). | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | | bankruptcy and 3571. | case can result in fines up | | noney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1 | 519, | |
| | | /s/ Nicole | | 0' | (Dahlar 2 | _ | |
| | | Nicole Mi Signature | | Signature o | I DEDIOI Z | | |
| | | Executed of | on September 15, 201 | 6 Executed or | า | | |
| | | | MM / DD / YYYY | | MM / DD / YYYY | _ | |
| | | | | | | | |

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Debtor 1 Nicole Minter Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Julie Glease | on | Date | September 15, 2016 | | |
|-------------------------|-----------------|---------------|--------------------|--|--|
| Signature of Attor | ney for Debtor | | MM / DD / YYYY | | |
| | | | | | |
| Julie Gleason | | | | | |
| Printed name | | | | | |
| Gleason & Gle | ason | | | | |
| Firm name | Firm name | | | | |
| 77 W Washing | ton, Ste 1218 | | | | |
| Chicago, IL 60 | 602 | | | | |
| Number, Street, City, S | tate & ZIP Code | | | | |
| Contact phone (31 | 2) 578-9530 | Email address | troy@chicagobk.com | | |
| 6273536 | | | | | |
| Bar number & State | | | | | |

| | | | .III I AUG O OI J 4 | |
|---------------------|--------------------------|-------------------|--------------------------------|---------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Nicole Minter | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | Chook if this is an |
| (II KIIOWII) | | | | Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | |
|-----|--|--------------|-------------------------------|
| | | Value | of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 128,748.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 31,230.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 159,978.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 159,799.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 12,038.00 |
| | Your total liabilities | \$ | 171,837.00 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,234.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,234.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1 Nicole Minter Document Page 9 of 54 Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

\$______\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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|---|--|--|--|--|--|--|
| s information to identify yo | our case and th | is filing: | | | | |
| Nicole Minter | | | | | | |
| First Name | Middle | Name | Last Name | | | |
| iling) First Name | Middle | Name | Last Name | | | |
| ates Bankruptcy Court for th | e: NORTHER | N DISTRICT OF ILLII | NOIS | | | |
| nber | | | - | | Ī | ☐ Check if this is an amended filing |
| egory, separately list and describest. Be as complete and acc | cribe items. List a | e. If two married people | e are filing together, both are e | equally respon | sible for sup | plying correct |
| | | | | | | |
| own or have any legal or equit | able interest in a | ny residence, building, | land, or similar property? | | | |
| Go to Part 2. | | | | | | |
| Where is the property? | | | | | | |
| | | What is the property | 2 Ohaali allahat assah | | | |
| 6 S Throop | | _ | • • • | Do not doduce | t accurred alain | ma ar ayamatiana Dut |
| <u> </u> | tion | Dupley or multi-unit building the | | the amount of | to not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | |
| | 50636-0000 ZIP Code | Land | | entire proper | ty? | Current value of the portion you own? \$128.748.00 |
| | | ☐ Timeshare ☐ Other | t in the property? Check one | Describe the | nature of you | ur ownership interest |
| | | Debtor 1 only | | | | |
| ok | | ☐ Debtor 2 only | | | | |
| il a r | Nicole Minter First Name All Form 106A/B All Form 106A/ | Nicole Minter First Name Middle ling) Real Form 106A/B leadle A/B: Property le | Nicole Minter First Name Middle Name All Form 106A/B Bedule A/B: Property egory, separately list and describe items. List an asset only once. If a best. Be as complete and accurate as possible. If two married people. It was propertied between the property of the prop | Nicole Minter First Name Middle Name Last Name Middle Name Las | Nicole Minter First Name Middle Name Last Name | Nicole Minter First Name Middle Name Last Name |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$128,748.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 16-29481 Doc 1 Filed 09/15/16 Entered 09/15/16 16:22:22 Desc Main Document Page 11 of 54 Case number (if known) Debtor 1 **Nicole Minter** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Kia Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: **Forte** Creditors Who Have Claims Secured by Property. Model ■ Debtor 1 only 2010 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 112000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another Cosignor only daughter to \$3,940.00 \$3,940.00 continue to pay. ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Ford** 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Fusion** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2010 Debtor 2 only Current value of the Current value of the 106000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$4,435.00 \$4,435.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$8,375.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Misc. Household Goods (Bedroom Furniture, Kitchen Appliances, \$800.00 tables, chairs, sofas)

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Consumer Electronics (Including Televisions, Radios, Phones, Stereos)

\$200.00

Case 16-29481 Doc 1 Filed 09/15/16 Entered 09/15/16 16:22:22 Document Page 12 of 54 Case number (if known) Debtor 1 **Nicole Minter** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe..... Books, Pictures, Videos, and DVDs \$10.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Used Clothing \$230.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Misc. Costume Jewelry \$10.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,250.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

Official Form 106A/B Schedule A/B: Property page 3

Cash on Hand

\$5.00

Case 16-29481 Doc 1 Filed 09/15/16 Entered 09/15/16 16:22:22 Desc Main Document Page 13 of 54 Case number (if known) Debtor 1 **Nicole Minter** 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... Chase \$1,100.00 17.1. Checking Harris \$200.00 17.2. Checking Bank of Am \$300.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: 403B Current Employer - 100% exempt \$20,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

No

| De | ebtor 1 | Nicole Minter | Document | Page 1 | .4 01 54 Ca | ase number (if known) | |
|-----|----------------------|---|-------------------------|---------------|-----------------|------------------------------|---|
| | Examp ■ No | s, copyrights, trademarks, trade secrets, productions: Internet domain names, websites, productive specific information about them | | | | S | |
| 27. | License Examp | es, franchises, and other general intang ples: Building permits, exclusive licenses, or Give specific information about them | | n holdings, | liquor license | es, professional licenses | |
| M | oney or _l | property owed to you? | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ■ No | unds owed to you Give specific information about them, include | ding whether you alrea | ady filed the | e returns and | the tax years | |
| | Examp ■ No | support bles: Past due or lump sum alimony, spouse Give specific information | al support, child suppo | ort, mainten | ance, divorce | e settlement, property se | ttlement |
| | Examp ■ No | amounts someone owes you bles: Unpaid wages, disability insurance pay benefits; unpaid loans you made to so Give specific information | | efits, sick p | ay, vacation p | pay, workers' compensa | tion, Social Security |
| 31. | | ts in insurance policies bles: Health, disability, or life insurance; hea | alth savings account (h | ⊣SA); credi | t, homeowne | er's, or renter's insurance | |
| | ■ Yes. | Name the insurance company of each police Company name: | cy and list its value. | | Beneficiary | : | Surrender or refund value: |
| | | Term Life Insurar Employer - No CS | • | | | | \$0.00 |
| | If you a someo | erest in property that is due you from so are the beneficiary of a living trust, expect p ne has died. Give specific information | | | licy, or are cu | urrently entitled to receive | e property because |
| | Examp ■ No | against third parties, whether or not youles: Accidents, employment disputes, insurable Describe each claim | | | a demand fo | or payment | |
| | ■ No | contingent and unliquidated claims of ex | very nature, including | g counterc | laims of the | debtor and rights to se | et off claims |
| | ■ No | ancial assets you did not already list Give specific information | | | | | |

Official Form 106A/B Schedule A/B: Property page 5

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| Debt | or 1 | Nicole Minter | | Case number (if known) | |
|--------------|--------|--|----------------------------|------------------------------|--------------|
| | | ne dollar value of all of your entries from Part 4, including rt 4. Write that number here | | | \$21,605.00 |
| Part ! | 5: Des | scribe Any Business-Related Property You Own or Have an Inter | est In. List any real esta | ate in Part 1. | |
| | - | wn or have any legal or equitable interest in any business-relate | ed property? | | |
| | No. Go | to Part 6. | | | |
| | Yes. G | o to line 38. | | | |
| Part (| | scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1. | Own or Have an Interes | st In. | |
| 16. D | o you | own or have any legal or equitable interest in any farm- | or commercial fishin | ng-related property? | |
| ı | No. (| Go to Part 7. | | | |
| I | ☐ Yes. | Go to line 47. | | | |
| Part 7 | 7: | Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| | | have other property of any kind you did not already list? les: Season tickets, country club membership | • | | |
| | No | | | | |
| | Yes. (| Give specific information | | | |
| 54. | Add th | ne dollar value of all of your entries from Part 7. Write tha | at number here | | \$0.00 |
| Part 8 | 8: | List the Totals of Each Part of this Form | | | |
| 55. | Part 1 | : Total real estate, line 2 | | | \$128,748.00 |
| 56. | Part 2 | : Total vehicles, line 5 | \$8,375.00 | - - | |
| 57. | Part 3 | : Total personal and household items, line 15 | \$1,250.00 | | |
| 58. | Part 4 | : Total financial assets, line 36 | \$21,605.00 | | |
| 59. | Part 5 | : Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6 | : Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7 | : Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total | personal property. Add lines 56 through 61 | \$31,230.00 | Copy personal property total | \$31,230.00 |
| 63. | Total | of all property on Schedule A/B. Add line 55 + line 62 | | | \$159.978.00 |

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this infor | | | | |
|---|---------------|-------------------------------|-----------|------------------------------------|
| Debtor 1 | Nicole Minter | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number | | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | |
|---|---|---|--|--|
| Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| \$128,748.00 | | \$15,000.00 | 735 ILCS 5/12-901 | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$4,435.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$4,435.00 | | \$2,035.00 | 735 ILCS 5/12-1001(b) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$10.00 | | 100% | 735 ILCS 5/12-1001(a) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$230.00 | | 100% | 735 ILCS 5/12-1001(a) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| | \$128,748.00 \$128,748.00 \$4,435.00 \$10.00 | \$4,435.00 \$10.00 \$230.00 | \$128,748.00 \$128,748.00 \$128,748.00 \$100% of fair market value, up to any applicable statutory limit \$4,435.00 \$100% of fair market value, up to any applicable statutory limit \$4,435.00 \$2,400.00 \$2,400.00 \$2,400.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit | |

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| Debt | or 1 | Nicole Minter | Doddinent | | Case number (if known) | |
|------|--------------|--|--------------------------------------|---------|---|------------------------------------|
| | | lescription of the property and line on ulule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | | . Costume Jewelry | \$10.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| | | | | | 100% of fair market value, up to any applicable statutory limit | |
| | | on Hand rom Schedule A/B: 16.1 | \$5.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| | LINE II | om schedule AVB. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | king: Chase rom Schedule A/B: 17.1 | \$1,100.00 | | \$900.00 | 735 ILCS 5/12-1001(b) |
| | LINE II | om <i>Schedule AVD</i> . 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | king: Harris | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) |
| L | Lille II | UIII Scriedule A/B. 11.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | king: Bank of Am | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(b) |
| | LINE II | om schedule AVB. 17.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 403B exem | : Current Employer - 100% | \$20,000.00 | | 100% | 735 ILCS 5/12-1006 |
| | | rom Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | ou claiming a homestead exemption ect to adjustment on 4/01/19 and every | | | iled on or after the date of adjustmer | nt.) |
| | N | No | | | | |
| | □ Y | es. Did you acquire the property cove | red by the exemption w | ithin 1 | ,215 days before you filed this case | ? |
| | | □ No | | | | |
| | | ☐ Yes | | | | |

| | Document | Page 18 | of 54 | | |
|---|--|---------------------|--|--------------------------|---------------------------|
| Fill in this information to identify y | our case: | | | | |
| Debtor 1 Nicole Minter | | | | | |
| First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) First Name | Middle Name | Last Name | | | |
| United States Benkruptov Court for the | he: NORTHERN DISTRICT OF ILL | INOIS | | | |
| United States Bankruptcy Court for the | ile. NORTHERN DISTRICT OF ILL | LINOIS | | | |
| Case number | | | | | |
| (if known) | | | | ☐ Check | if this is an |
| | | | | amend | ded filing |
| | | | | | |
| Official Form 106D | | | | | |
| Schedule D: Creditor | rs Who Have Claims | Secured | by Propert | V | 12/15 |
| concare b. creates | | | by 1 Topolt | <i>J</i> | 12,10 |
| | le. If two married people are filing togeth | | | | |
| is needed, copy the Additional Page, fill number (if known). | l it out, number the entries, and attach it | to this form. On | the top of any additio | nai pages, write your na | me and case |
| Do any creditors have claims secured | hy your property? | | | | |
| _ • | | aabadulaa Va | , have nothing also t | a ranget on this form | |
| <u>_</u> | it this form to the court with your other | scriedules. You | u nave notning else t | o report on this form. | |
| Yes. Fill in all of the information | on below. | | | | |
| Part 1: List All Secured Claims | | | | | |
| 2 List all secured claims. If a creditor ha | as more than one secured claim, list the cre | ditor separately | Column A | Column B | Column C |
| for each claim. If more than one creditor h | has a particular claim, list the other creditors | s in Part 2. As | Amount of claim | Value of collateral | Unsecured |
| much as possible, list the claims in alphab | cal order according to the creditor's name. | | Do not deduct the | that supports this | portion |
| 2.1 Chase Mtg | Describe the property that secures t | the claim: | value of collateral. \$151,787.00 | claim \$128,748.00 | If any \$23,039.00 |
| Creditor's Name | 6136 S Throop Chicago, IL 6 | | Ψ101,707.00 | Ψ120,140.00 | Ψ20,000.00 |
| | Cook County | ,0000 | | | |
| | _ | | | | |
| Po Box 24696 | As of the date you file, the claim is: apply. | Check all that | | | |
| Columbus, OH 43224 | Contingent | | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | | |
| | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | An agreement you made (such as i | mortgage or secu | red | | |
| Debtor 2 only | car loan) | 0 0 | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, med | chanic's lien) | | | |
| ☐ At least one of the debtors and another | _ ` ` ` | criariic 3 ilerij | | | |
| ☐ Check if this claim relates to a | Other (including a right to offset) | | | | |
| community debt | Curier (including a right to offset) | | | | |
| | | | | | |
| Opened | | | | | |
| 03/09 Las | t | | | | |
| Date debt was incurred 7/31/14 | Last 4 digits of account numl | _{ber} 1250 | | | |
| Date debt was incurred 7/31/14 | Last 4 digits of account number | | | | |
| O O O O O O O O O O O O O O O O O O O | 5 | 4 - 1-1-1 | #0.040.00 | \$2.040.00 | £4.070.00 |
| 2.2 OverInd Bond Creditor's Name | Describe the property that secures t | | \$8,012.00 | \$3,940.00 | \$4,072.00 |
| Creditor's Name | 2010 Kia Forte 112000 miles | | | | |
| | Cosignor only daughter to c | ontinue | | | |
| 4=04.344 = .114 | As of the date you file, the claim is: | Check all that | | | |
| 4701 W Fullerton | apply. | | | | |
| Chicago, IL 60639 | Contingent | | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | | |
| Who awas the debts of | Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | An agreement you made (such as rear loan) | mortgage or secu | red | | |
| Debtor 2 only | _ | | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, med | chanic's lien) | | | |
| At least one of the debtors and another | er | | | | |

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| Debtor 1 Nicole | Minter | | Case number (if know) |
|---------------------|---|--|-----------------------|
| First Nam | e Middle N | Name Last Name | |
| ☐ Check if this cla | | ☐ Other (including a right to offset) | |
| Date debt was incu | Opened 8/31/13 Last Active 6/18/16 | Last 4 digits of account numbe | ber <u>0999</u> |
| | page of your form, add | Column A on this page. Write that number the dollar value totals from all pages. | ¥ 22, 22 22 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | 0430 10 25 401 | Document | Page 2 | of 54 | DC50 Main |
|---------------------------|--|--|------------------|---|---------------------------------|
| Fill in this | s information to identify your | | | | |
| Debtor 1 | Nicole Minter | | | | |
| Dobtor 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fil | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | |
| Case num | nber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | Form 106E/F | | | | |
| | | ho Have Unsecured | Claime | | 12/15 |
| | | | | Part 2 for creditors with NONPRIORI | |
| eft. Attach name and c | the Continuation Page to this pag case number (if known). | e. If you have no information to rep | | he Part you need, fill it out, number to not file that Part. On the top of an | |
| | List All of Your PRIORITY Un | | | | |
| | y creditors have priority unsecure | d claims against you? | | | |
| | . Go to Part 2. | | | | |
| ☐ Yes | | | | | |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | | | |
| 3. Do any | y creditors have nonpriority unsec | cured claims against you? | | | |
| ☐ No. | You have nothing to report in this p | art. Submit this form to the court with y | our other sche | edules. | |
| ■ Yes | S. | | | | |
| unsecu | ared claim, list the creditor separately | y for each claim. For each claim listed, | identify what t | holds each claim. If a creditor has m ype of claim it is. Do not list claims alre three nonpriority unsecured claims fill | ady included in Part 1. If more |
| | | | | | Total claim |
| 4.1 A | fni, Inc. | Last 4 digits of acco | unt number | 9221 | \$398.00 |
| | onpriority Creditor's Name | | | 0 | |
| - | o Box 3097 loomington, IL 61702 | When was the debt | incurred? | Opened 05/16 | |
| | umber Street City State Zlp Code | As of the date you fi | ile, the claim i | s: Check all that apply | |
| W | ho incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and and | other Type of NONPRIORI | TY unsecured | l claim: | |
| | Check if this claim is for a com | munity | | | |
| | ebt the claim subject to offset? | ☐ Obligations arising report as priority clain | | ration agreement or divorce that you d | d not |
| _ | No | <u>'</u> ' ' | | g plans, and other similar debts | |
| | | | • | • • | |
| L |] _{Yes} | Other. Specify | Joilection I | Attorney At T U-Verse | |

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| Bell Subrogation Services | Last 4 digits of account number | | \$2,669.00 |
|---|--|--|------------|
| Nonpriority Creditor's Name PO Box 24538 Towns El 33633 | When was the debt incurred? | | |
| Tampa, FL 33623 Number Street City State Zlp Code | As of the date you file, the claim is: | Check all that apply | |
| Who incurred the debt? Check one. | , | Chook an that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured c | elaim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separat report as priority claims | tion agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharing p | plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify State Farm M | lurphfreesboro | |
| Comenity Bank/nwyrk&co | Last 4 digits of account number | 6368 | \$1,081.00 |
| Nonpriority Creditor's Name | | | ψ.,σσσσ |
| 220 W Schrock Rd Westerville, OH 43081 | | Opened 12/11 Last Active 10/09/15 | |
| Number Street City State Zlp Code | As of the date you file, the claim is: | Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured c | laim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt s the claim subject to offset? | Obligations arising out of a separat report as priority claims | tion agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing p | plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Charge Acco | unt | |
| Diversified Consultant | Last 4 digits of account number | 2530 | \$483.00 |
| Nonpriority Creditor's Name 10550 Deerwood Park Blvd Jacksonville, FL 32256 | When was the debt incurred? | Opened 06/16 | |
| Number Street City State Zlp Code | As of the date you file, the claim is: | Check all that apply | |
| Who incurred the debt? Check one. | - | , | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured c | elaim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separat report as priority claims | tion agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing p | plans, and other similar debts | |
| □Yes | ■ Other. Specify Collection At | torney At T | |

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| Debioi | NICOIE WITHER | | Case number (ii know) | | |
|--------|--|--|--|----------|--|
| 4.5 | Enhanced Recovery Co L | Last 4 digits of account number | 8230 | \$172.00 | |
| | Nonpriority Creditor's Name Po Box 57547 | When was the debt incurred? | Opened 02/16 | | |
| | Jacksonville, FL 32241 Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | |
| | Who incurred the debt? Check one. | , io oi ino unio you ino, ino oiumi | or o | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community | Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | □Yes | ■ Other Specify Collection | | | |
| | | | | | |
| 4.6 | Illinois Department of Revenue | Last 4 digits of account number | | Unknown | |
| | Nonpriority Creditor's Name Bankruptcy Section PO Box 64338 | When was the debt incurred? | | | |
| | Chicago, IL 60664-0338 Number Street City State Zlp Code | | | | |
| | Who incurred the debt? Check one. | As of the date you file, the claim | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt | Student loans | | | |
| | Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | | | |
| | Yes | Other. Specify Notice Only | <u> </u> | | |
| 4.7 | Illinois Dept of Employment Securit | Last 4 digits of account number | Notic Only | Unknown | |
| | Nonpriority Creditor's Name Bankruptcy Unit Collection Subdivis | When was the debt incurred? | | | |
| | 33 S State St 10th Floor Chicago, IL 60603 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | and the state of t | | |
| | ■ No | ☐ Debts to pension or profit-sharing | | | |
| | Yes | Other. Specify Notice Only | / | | |

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| Internal Revenue Service | Last 4 digits of account number | Unknow |
|--|--|----------|
| Nonpriority Creditor's Name PO Box 7346 Philodolphia PA 10101 7346 | When was the debt incurred? | |
| Philadelphia, PA 19101-7346 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | □ Debts to pension or profit-sharing plans, and other similar debts | |
| ■ No □ Yes | | |
| ⊒ Yes | Other. Specify Notice Only | |
| Med Busi Bur | Last 4 digits of account number 2019 | \$587. |
| Nonpriority Creditor's Name 1460 Renaissance Dr Park Ridge, IL 60068 | When was the debt incurred? Opened 12/15 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| ☐Yes | Collection Attorney Med1 02 Rush University Medical Cent | |
| Med Busi Bur | Last 4 digits of account number 2022 | \$258. |
| Nonpriority Creditor's Name | | <u> </u> |
| 1460 Renaissance Dr | When was the debt incurred? Opened 03/16 | |
| Park Ridge, IL 60068 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | , | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| □ Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Collection Attorney Med1 02 Rush Other. Specify University Medical Cent | |

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| NICOle Williter | | Case Hulliber (II know) | |
|--|--|---|------------|
| Peoples Engy | Last 4 digits of account number | 6050 | \$399.00 |
| Nonpriority Creditor's Name 200 East Randolph Chicago II 60604 | When was the debt incurred? | Opened 5/19/09 Last Active 5/11/10 | |
| Chicago, IL 60601 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharir | ng plans, and other similar debts | |
| □ Yes | Other. Specify Agriculture | | |
| Portfolio Recovery Ass | Last 4 digits of account number | 1455 | \$903.00 |
| Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502 | When was the debt incurred? | Opened 08/15 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure ☐ Student loans | d claim: | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharir | ng plans, and other similar debts | |
| ☐ Yes | | Company Account Citibank N.A. | |
| Santander Consumer Usa | Last 4 digits of account number | 1000 | \$4,564.00 |
| Nonpriority Creditor's Name Po Box 961245 | When was the debt incurred? | Opened 08/10 Last Active 2/25/15 | |
| Ft Worth, TX 76161 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt | Student loans | | |
| Is the claim subject to offset? | Obligations arising out of a separe report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Automobile | • | |
| | - ···-·· - p - · ···) | | |

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Debtor 1 Nicole Minter Case number (if know) 4.1 \$524.00 Transworld Systems Last 4 digits of account number Nonpriority Creditor's Name 507 prudential Rd. When was the debt incurred? Horsham, PA 19044 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Enterprise Rent a Car

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Part 4: Add the Amounts for Each Type of Unsecured Claim

debt

■ No

☐ Yes

Is the claim subject to offset?

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|--------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | 6f. | Student loans | 6f. | \$ | Total Claim |
| Total claims | 01. | otausiit isunis | oi. | Ψ | 0.00 |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 12,038.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 12,038.00 |

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| | | DOWN | 11 1 MM: E0 01 0= | |
|---------------------|--------------------------|-------------------|-------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Nicole Minter | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the r, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | - | | |

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| | | DOGUITIE | <u> Paue Z7 u</u> | л э4 | |
|--|---|---|---|--|--|
| Fill in this | information to identify your | | | | |
| Debtor 1 | Nicole Minter | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United Stat | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| 0 . | | - | | | |
| Case numb | er | | | | ☐ Check if this is an |
| O((; - ; - 1 | F 400LL | | | | amended filing |
| | Form 106H ule H: Your Cod | ebtors | | | 12/15 |
| | | | | | |
| ■ No □ Yes 2. With Arizona ■ No. □ Yes. | a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou | I lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live | operty state or territor erto Rico, Texas, Wash with you at the time? | y? (<i>Community propert</i> ington, and Wisconsin.) | ty states and territories include |
| in line Form 1 | 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed tl | he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor lame, Number, Street, City, State and ZI | P Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt |
| | , | | | Oricon dii soricadi | oo that apply. |
| 3.1 | Name | | | Schedule D, lin | · |
| | iao | | | ☐ Schedule E/F, I☐ Schedule G, Iin | |
| _ | Number Street | | | | |
| | Number Street City | State | ZIP Code | | |
| 3.2 | | | | □ Sahadula D. lia | |
| | Name | | | _ ☐ Schedule D, lin☐ Schedule E/F, l | |
| | | | | ☐ Schedule G, lin | |
| <u> </u> | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| | | | | | | | - | | | | |
|----------------------------|--|---|---|---|---------------------|----------------|-----------------------|-------------------------|---------------------------|----------------------------------|-----------------|
| Fill | in this information to | identify your ca | ase: | | | | | | | | |
| Del | btor 1 | Nicole Minte | er | | | _ | | | | | |
| 1 - | btor 2 puse, if filing) | | | | | _ | | | | | |
| Uni | ited States Bankrupto | y Court for the | : NORTHERN DISTRIC | T OF ILLINOIS | | | | | | | |
| (If kr | se number | 1061 | | | | | □ A | | ed filing ent showing | g postpetition ollowing date: | |
| | fficial Form | | | | | | N | 1M / DD/ \ | YYYY | | |
| Be a sup spo atta | plying correct informuse. If you are sepa ch a separate sheet | curate as poss mation. If you rated and you | Sille sible. If two married peopare married and not filing with the top of any addition | ig jointly, and your th you, do not inclu | spouse ide infor | is liv mati | ring with on about | you, incl t your spo | ude inform ouse. If mo | nation about ore space is | your needed, |
| 1. | Fill in your employ information. | yment | | Debtor 1 | | | | Debtor 2 | 2 or non-fil | ling spouse | |
| | attach a separate p | If you have more than one job, attach a separate page with information about additional | | ■ Employed□ Not employed | | | | ☐ Empl | oyed mployed | | |
| | employers. | | Occupation | Accounts Paya | ble | | | | | | |
| | Include part-time, s self-employed work | | Employer's name | Northern Illinois | s Confe | ren | ce | | | | |
| | Occupation may incor homemaker, if it | | Employer's address | | | | | | | | |
| | | | How long employed th | nere? 20 Yea | rs | | | _ | | | |
| Pai | Give Deta | ils About Mor | nthly Income | | | | | | | | |
| | imate monthly inconuse unless you are se | | ate you file this form. If y | ou have nothing to r | eport for | any | line, write | e \$0 in the | space. Inc | clude your no | n-filing |
| | ou or your non-filing s e space, attach a sep | | ore than one employer, co this form. | mbine the informatio | n for all e | empl | oyers for | that perso | on on the lir | nes below. If | you need |
| | | | | | | | For Del | btor 1 | | otor 2 or ng spouse | |
| 2. | | | ry, and commissions (be calculate what the monthly | | 2. | \$ | 4 | ,154.00 | \$ | N/A | - |
| 3. | Estimate and list i | monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | <u>-</u> |
| 4. | Calculate gross In | ncome. Add lir | ne 2 + line 3. | | 4. | \$ | 4,1 | 54.00 | \$ | N/A | |

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| Deb | tor 1 | Nicole Minter | _ | C | ase number (if kr | own) | | | | |
|-----|----------------------------|--|------------|------|-------------------|-------|--------|--------------------------|---------------------|--|
| | | | | | For Debtor 1 | | | or Debtor on-filing s | | |
| | Cop | by line 4 here | 4. | , | \$ 4,15 4 | .00 | \$_ | | N/A | <u>. </u> |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | . ! | \$ 720 | 0.00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | | 0.00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | . : | \$ | 0.00 | \$ | | N/A | \ |
| | 5d. | Required repayments of retirement fund loans | 5d. | . : | \$ C | .00 | \$ | | N/A | _ |
| | 5e. | Insurance | 5e. | | . ——— | 0.00 | \$_ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | | | 0.00 | \$_ | | N/A | _ |
| | 5g. 5h. | Union dues Other deductions. Specify: | 5g. 5h. | | . — | 0.00 | + \$ | | N/A N/A | _ |
| _ | | · · · · · · · · · · · · · · · · · · · | _ | | | | · - | | | _ |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | 9 | | 0.00 | \$_ | | N/A | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | 9 | 3,234 | .00 | \$_ | | N/A | <u>.</u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | |
| | | monthly net income. | 8a. | . ; | \$ 0 | .00 | \$ | | N/A | 1 |
| | 8b. | Interest and dividends | 8b. | . : | \$ <u> </u> | 0.00 | \$ | | N/A | <u> </u> |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | | 0.00 | \$_ | | N/A | |
| | 8d. | Unemployment compensation | 8d. | | | 0.00 | \$_ | | N/A | _ |
| | 8e. 8f. | Social Security Other government assistance that you regularly receive | 8e. | . : | \$ C | 0.00 | \$_ | | N/A | |
| | OI. | Include cash assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | | \$ 0 | 0.00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | — 8g. | . : | | 0.00 | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: | 8h. | .+ 3 | \$ 0 | 0.00 | + \$ _ | | N/A | <u> </u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0 | 0.00 | \$_ | | N/A | A |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 3,234.00 | + \$ | | N/A | = \$ | 3,234.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | *- | 3,234.00 | - * | | 17/5 | | 3,234.00 |
| 11. | Star Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depe | | . , | | | Schedule | e <i>J</i> . +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainlies | | | | | | e. 12. | \$Combi | 3,234.00 ned |
| 13. | Dο | you expect an increase or decrease within the year after you file this form | ? | | | | | | month | ly income |
| 10. | | No. | • | | | | | | | |
| | П | Yes, Explain: | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Elle | n this informa | tion to identify yo | our case: | | | 1 | | |
|-------------|----------------------------|--|------------------------|---|------------------------|-----------------|-------------------------------|-------------------------------|
| | | | | | | Ob a st | r if this is: | |
| Debt | ioi T | Nicole Minte | r | | | | if this is: An amended filing | |
| Debt | | | | | | | supplement show | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | 1 | 3 expenses as of | the following date: |
| Unite | ed States Bankr | ruptcy Court for the | : NORTH | HERN DISTRICT OF ILLIN | IOIS | | /M / DD / YYYY | |
| | e number | | | | | | | |
| (II KI | iowii) | | | | | | | |
| Of | ficial Fo | rm 106J | | | | | | |
| Sc | chedule | J: Your | Exper | nses | | | | 12/15 |
| Be a | as complete a | and accurate as | possible eded, atta | . If two married people a ich another sheet to this | | | | |
| Part | | ibe Your House | hold | | | | | |
| 1. | Is this a joir | | | | | | | |
| | ■ No. Go to | | in a conar | ate household? | | | | |
| | □ res. Doe | | п а зера | ate nousenoid: | | | | |
| | | | st file Offic | ial Form 106J-2, <i>Expense</i> | s for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | • | Yes. | Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Child | | 8 | Yes |
| | | | | | Child | | 22 | □ No |
| | | | | | Cillia | | | ■ Yes □ No |
| | | | | | | | | ☐ Yes |
| | | | | | - | | | □ No |
| _ | _ | | | | | | | ☐ Yes |
| 3. | | oenses include f people other tl | han | No | | | | |
| | • | d your depende | | Yes | | | | |
| Part | 2: Estim | ate Your Ongoi | ng Month | ly Expenses | | | | |
| Esti exp | imate your ex | penses as of yo | our bankr | uptcy filing date unless yey is filed. If this is a sup | | | | |
| | | | | government assistance | | | | |
| | value of suclicial Form 10 | | d have inc | cluded it on Schedule I: | Your Income | | Your exp | enses |
| | The mental of | | | | | | | |
| 4. | | or nome owners and any rent for the | | ses for your residence. or lot. | Include first mortgage | e 4. \$ | | 950.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 |
| | | rty, homeowner's | | | | 4b. \$ | | 0.00 |
| | | | | upkeep expenses | | 4c. \$ | | 45.00 |
| 5. | | owner's associat | | dominium dues our residence, such as ho | ome equity loans | 4d. \$ 5. \$ | | 0.00 0.00 |
| ٥. | . wantonan | vgugo payiik | v. y. | | mo oquity loans | υ. ψ | | 0.00 |

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| Nicole Minter | Case num | ber (if known) | |
|---|--|--|--|
| lities. | | | |
| | 6a | \$ | 300.00 |
| • | | · - | 60.00 |
| | | · | 300.00 |
| | | * | 0.00 |
| · | | · | |
| . • | | · | 600.00 |
| | | · | 0.00 |
| e | | * | 125.00 |
| rsonal care products and services | 10. | \$ | 130.00 |
| • | 11. | \$ | 195.00 |
| | 12. | \$ | 300.00 |
| | | · | 100.00 |
| | | · | |
| | 14. | Φ | 0.00 |
| | | | |
| , , , | 150 | c | 0.00 |
| | | · | 0.00 |
| | | · | 0.00 |
| | | | 129.00 |
| | 15d. | \$ | 0.00 |
| | | _ | |
| | 16. | \$ | 0.00 |
| | 170 | ¢ | 0.00 |
| • • | | · | 0.00 |
| | | · | 0.00 |
| | | * | 0.00 |
| · · · | | \$ | 0.00 |
| ur payments of alimony, maintenance, and support that you did not report as | s 18. | \$ | 0.00 |
| her navments you make to support others who do not live with you | | \$ | 0.00 |
| | 19 | Ψ | 0.00 |
| , | | our Income. | |
| | | | 0.00 |
| | | | 0.00 |
| | | · | |
| · | | · | 0.00 |
| | | | 0.00 |
| | | | 0.00 |
| her: Specify: | 21. | _+\$ | 0.00 |
| Iculate your monthly expenses | | | |
| | | \$ | 3,234.00 |
| 9 | | | <u> </u> |
| | | · | 2 00 4 00 |
| c. Add line ZZa and ZZb. The result is your monthly expenses. | | a | 3,234.00 |
| | | | |
| a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,234.00 |
| | 23b. | -\$ | 3,234.00 |
| • • | | | -, - |
| | 20 | œ. | 0.00 |
| The result is your monthly net income. | 23c. | D | 0.00 |
| way expect on ingresses or degrees in your expenses within the year offer. | ou file th!- | form? | |
| you expect an increase or decrease in your expenses within the year after y | ou me this | HITTO ! | |
| | ur mortaage r | navment to increase | se or decrease hecause o |
| example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage? | ur mortgage p | payment to increas | se or decrease because o |
| example, do you expect to finish paying for your car loan within the year or do you expect you | ur mortgage p | payment to increas | se or decrease because o |
| | litities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies ildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services dical and dental expenses ansportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations surance. not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance. Specify: xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify: stallment or lease payments: a. Car payments for Vehicle 1 b. Car payments for Vehicle 1 b. Car payments for Vehicle 2 c. Other. Specify: ur payments of alimony, maintenance, and support that you did not report a ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I) her payments you make to support others who do not live with you. ecify: beer real property expenses not included in lines 4 or 5 of this form or on Sch a. Mortgages on other property b. Real estate taxes c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses e. Homeowner's association or condominium dues her: Specify: Iculate your monthly expenses a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses. Iculate your monthly net income. a. Copy line 12 (your combined monthly income) from Schedule I. b. Copy your monthly expenses from line 22c above. c. Subtract your monthly expenses from your monthly income. | Ilities: Electricity, heat, natural gas 6a. Water, sewer, garbage collection 6b. Telephone, cell phone, Internet, satellite, and cable services 6c. Other, Specify: 6d. od and housekeeping supplies 7. ilidcare and children's education costs 8. sthing, laundry, and dry cleaning 9. rsonal care products and services 10. didical and dental expenses 11. ansportation. Include gas, maintenance, bus or train fare. not include car payments. 12. tertainment, clubs, recreation, newspapers, magazines, and books 13. aritable contributions and religious donations 14. surance. 15a. a. Life insurance deducted from your pay or included in lines 4 or 20. a. Life insurance 15c. b. Health insurance 15c. c. Vehicle insurance, Specify: 15c. d. Other insurance, Specify: 15c. c. Car payments for Vehicle 1 17a. b. Car payments for Vehicle 2 17b. c. Car payments for Vehicle 2 17c. c. Other, Specify: 17c. 17d. d. Other inspecify: 17d. 17d. ur payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061), her payments you make to support others who do not live with you. 18d. b. Property, homeowner's, or renter's insurance 20c. 20d. d. Maintenance, repair, and upkeep expenses 20d. d. Maintenance, repair, and upkeep expenses 20d. 20d. d. Homeowner's association or condominium dues 20d. d. Homeowner's association or condominium dues 20d. d. Add lines 4 through 21. 20d. 20d. c. Add lines 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Copy line 12 (your combined monthly income) from Schedule I. 23a. c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add lines 24 through 21. 20d. 20d. c. Add lines 24 through 21. 20d. 20d. 20d. c. Copy line 22 (monthly expenses from line 22c a | lities: Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services 6c. \$ Other. Specify: 6d. \$ od and housekeeping supplies ildcare and children's education costs 8. \$ sthing, laundry, and dry cleaning 9. \$ srsonal care products and services idical and dental expenses 11. \$ strain ont include gas, maintenance, bus or train fare. not include car payments. 12. \$ not include car payments. 14. \$ strainent, clubs, recreation, newspapers, magazines, and books 13. \$ strainance. 14. \$ strainance. 15. \$ c. Vehicle insurance deducted from your pay or included in lines 4 or 20. a. Life insurance 15a. \$ c. Vehicle insurance 15b. \$ c. Vehicle insurance. Specify: 15c. \$ c. Car payments for Vehicle 1 15c. Car payments for Vehicle 2 15d. Other. Specify: 15d. Other. Specify: 17d. \$ c. Other. Spe |

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| Fill in this inforr | mation to identify your | case: | | | |
|---------------------------------|--|---------------------------|------------------------------|--|-------------------|
| Debtor 1 | Nicole Minter | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| | | | | | |
| United States Ba | inkruptcy Court for the: | NORTHERN DISTRIC | F OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | ☐ Che | eck if this is an |
| | | | | ame | ended filing |
| | | | | | |
| O#: -: -! = = | - 400D | | | | |
| Official Forn | | | | | |
| Declarat | ion About a | ın Individua | Debtor's Sc | hedules | 12/15 |
| | | | | | |
| If two married pe | eople are filing togethe | r, both are equally respo | onsible for supplying corr | ect information. | |
| You must file this | s form whenever you fi | le bankruntov schedule | s or amended schedules | Making a false statement, concea | ling property, or |
| | | | | n fines up to \$250,000, or imprison | |
| years, or both. 18 | 8 U.S.C. §§ 152, 1341, 1 | 519, and 3571. | | | |
| | | | | | |
| Cian | - Dalaw | | | | |
| Sign | n Below | | | | |
| Did you pay | y or agree to hay some | one who is NOT an atte | rney to help you fill out b | ankruptov forme? | |
| Did you pay | y or agree to pay some | one who is NOT an allo | They to help you fill out be | ankiupicy forms: | |
| ■ No | | | | | |
| | | | | Attack Davidous Datition | Duananan'a Nation |
| ☐ Yes. N | Name of person | | | Attach Bankruptcy Petition Declaration, and Signature | |
| | | | | | () |
| | | | | | |
| | Ity of perjury, I declare e true and correct. | that I have read the sun | nmary and schedules filed | d with this declaration and | |
| that they are | e true and correct. | | | | |
| X /s/ Nico | ole Minter | | X | | |
| Nicole | | | Signature of I | Debtor 2 | |
| Signatur | re of Debtor 1 | | | | |
| Date \$ | September 15, 2016 | | Date | | |
| | | | | | |

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| Fill in | this informa | tion to identify you | r case: | | | |
|------------|--------------------------------|--|--|---|---|---|
| Debto | r 1 | Nicole Minter | | | | |
| Debto | r 2 | First Name | Middle Name | Last Name | | |
| | if, filing) | First Name | Middle Name | Last Name | | |
| United | l States Bank | ruptcy Court for the: | NORTHERN DISTRICT O | OF ILLINOIS | | |
| _ | | | | | | |
| (if known | number n) | | | | | heck if this is an |
| | | | | | a | mended filing |
| | | | | | | |
| Offic | cial Forr | n 107 | | | | |
| Stat | ement c | of Financial | Affairs for Individ | duals Filing for E | Bankruptcy | 4/1 |
| inform | ation. If morer (if known). | e space is needed, Answer every que | attach a separate sheet to stion. | this form. On the top of an | equally responsible for sup y additional pages, write you | |
| Part 1 | Give Det | ails About Your Ma | arital Status and Where You | Lived Before | | |
| 1. W | hat is your c | urrent marital statu | ıs? | | | |
| | l Married | | | | | |
| | Not marrie | ed | | | | |
| 2. D | uring the las | t 3 years, have you | lived anywhere other than | where you live now? | | |
| | 1 | | | | | |
| - | l No l Yes Lista | all of the places you l | ived in the last 3 years. Do no | ot include where you live now | N | |
| _ | | . , | · | ŕ | | |
| C | Debtor 1 Prio | r Address: | Dates Debtor 1 lived there | Debtor 2 Prior A | ddress: | Dates Debtor 2 lived there |
| | and territories | include Arizona, Ca | lifornia, Idaho, Louisiana, Ne | vada, New Mexico, Puerto R | nity property state or territory tico, Texas, Washington and W | |
| | res. Make | e sure you fill out Sci | hedule H: Your Codebtors (Ot | ilciai Foitii 100H). | | |
| Part 2 | Explain | the Sources of You | r Income | | | |
| Fi | Il in the total a | amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | current year until for bankruptcy: | ☐ Wages, commissions, bonuses, tips | \$31,433.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | st calendar y ary 1 to Dece | vear: ember 31, 2015) | ☐ Wages, commissions, bonuses, tips | \$49,761.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| Official I | Form 107 | | Statement of Financial Aff | airs for Individuals Filing for E | Bankruptcy | page |

Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... paid still owe **Progressive Leasing** \$2,250.00 \$0.00 ■ Mortgage 10619 South Jordan Gateway ☐ Car Suite 100 ☐ Credit Card South Jordan, UT 84095 Loan Repayment ☐ Suppliers or vendors □ Other

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☐ No

Yes. List all payments to an insider.

□ No.

Yes

Go to line 7.

attorney for this bankruptcy case.

Insider's Name and Address

Dates of payment

Total amount

paid

Amount you

Reason for this payment

still owe

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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Describe the action the creditor took

No

☐ Yes

Creditor Name and Address

Amount

Date action was

taken

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Page 36 of 54 Document Case number (if known) Debtor 1 **Nicole Minter** Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? □ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Church \$150/Month \$0.00 Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Gleason & Gleason LLC \$90.00 attorney fees plus \$335.00 court 2016 \$940.00 77 W. Washington, Ste 1218 filing fee. Chicago, IL 60602 http://chilawyers.com

Credit Counseling

\$9.95

Summit Financial Education Inc

4800 E Flower St **Tucson, AZ 85712** http://summitfe.org 2016

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Debtor 1 Nicole Minter

| 17. | Within 1 year before you filed for bankruptor promised to help you deal with your credit. Do not include any payment or transfer that you have a likely some second or transfer that you have the second of the second or transfer that you have a likely second or transfer that you have | ors or to make payments | | | or transfer any prope | erty to anyone who |
|-----|--|--|------------------------------|------------------|---|---|
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | Description and values | alue of any prop | perty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankrup transferred in the ordinary course of your burned both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details. | ousiness or financial affa ade as security (such as t | airs? the granting of a s | | | |
| | Person Who Received Transfer Address | Description and v | | | any property or received or debts | Date transfer was made |
| | Person's relationship to you | | | para iii ox | g- | |
| 19. | Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details. | | y property to a s | self-settled tru | ust or similar device | of which you are a |
| | Name of trust | Description and v | alue of the prop | erty transferr | ed | Date Transfer was made |
| Par | t 8: List of Certain Financial Accounts, In | struments, Safe Deposi | t Boxes, and Sto | rage Units | | |
| 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso | or other financial accou | nts; certificates | of deposit; sh | | |
| | • | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accourtinstrument | clo | te account was osed, sold, oved, or nsferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | year before you filed for | bankruptcy, any | y safe deposi | t box or other depos | sitory for securities, |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe the | contents | Do you still have it? |
| 22. | Have you stored property in a storage unit | or place other than your | home within 1 y | ear before yo | ou filed for bankrupt | cy? |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Describe the | contents | Do you still have it? |
| | | , | | | | |

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Debtor 1 Nicole Minter

| Par | t 9: Identify Property You Hold or Control for S | Someone Else | | | |
|-----|--|--|---------|-------------------------------------|-----------------------|
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | , or hold in trust | |
| | No | | | | |
| | Yes. Fill in the details. | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | De | scribe the property | Value |
| Pai | t 10: Give Details About Environmental Informa | tion | | | |
| For | the purpose of Part 10, the following definitions a | apply: | | | |
| | Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub | r, land, soil, surface water, grou | _ | • | |
| | Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s | | al law, | whether you now own, operate, o | or utilize it or used |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s | | us wa | ste, hazardous substance, toxic s | substance, |
| Rep | ort all notices, releases, and proceedings that yo | u know about, regardless of wh | en the | ey occurred. | |
| 24. | Has any governmental unit notified you that you | may be liable or potentially liab | le un | der or in violation of an environme | ental law? |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State & ZIP Code) | and | Environmental law, if you know it | Date of notice |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State & ZIP Code) | and | Environmental law, if you know it | Date of notice |
| 26. | Have you been a party in any judicial or adminis | trative proceeding under any en | viron | mental law? Include settlements a | and orders. |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ture of the case | Status of the case |
| Pai | t 11: Give Details About Your Business or Conr | nections to Any Business | | | |
| 27. | Within 4 years before you filed for bankruptcy, d | lid you own a business or have a | any of | f the following connections to any | business? |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | |
| | ☐ A member of a limited liability company | (LLC) or limited liability partners | ship (I | LLP) | |
| | ☐ A partner in a partnership | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | |
| | ☐ An owner of at least 5% of the voting or | equity securities of a corporatio | n | | |

Case 16-29481 Doc 1 Filed 09/15/16 Entered 09/15/16 16:22:22 Desc Main Document Page 39 of 54 Case number (if known) Debtor 1 **Nicole Minter** No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Nicole Minter | | | | | |
|-------------------|------------------------|---|--|--|--|
| Nico | le Minter | Signature of Debtor 2 | | | |
| Signa | ture of Debtor 1 | | | | |
| Date | September 15, 20 | Date | | | |
| | u attach additional pa | to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | |
| No | | | | | |
| ☐ Yes | 3 | | | | |
| Did yo | u pay or agree to pay | neone who is not an attorney to help you fill out bankruptcy forms? | | | |
| No | | | | | |
| □ Yes | s. Name of Person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |

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| Fill in this information to identify your case: | | | | | |
|---|---|----------------------|---|---|--|
| Debtor 1 | 1 Nicole Minter | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | TRICT OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | ☐ Check if this is an amended filing | |
| | | | viduals Filing Under Chapte | r 7 12/15 | |
| _ | ve claims secured by y | - | out this form it. | | |
| _ | sed personal property | | ot expired. | | |
| You must file th | nis form with the court ever is earlier, unless t | within 30 days after | you file your bankruptcy petition or by the date set e time for cause. You must also send copies to the | | |
| sign a | nd date the form. | • | oth are equally responsible for supplying correct in | | |
| | and accurate as possi your name and case nu | | s needed, attach a separate sheet to this form. On t | he top of any additional pages, | |
| Part 1: List Y | our Creditors Who Ha | ve Secured Claims | | | |
| For any credi information b | | Part 1 of Schedule D | e: Creditors Who Have Claims Secured by Property | (Official Form 106D), fill in the | |
| Identify the c | reditor and the property | that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | |
| | | | Scource a dest. | as exempt on concaute c. | |
| Creditor's | Chase Mtg | | Currender the preparty | □No | |
| name: | Chase Mily | | ☐ Surrender the property.☐ Retain the property and redeem it. | □ No | |
| | | | Retain the property and redeem it. | ■ Yes | |
| Description o | | nicago, IL | Reaffirmation Agreement. | | |
| property securing deb | 60636 Cook Cou t: | nty | ☐ Retain the property and [explain]: | _ | |
| Creditor's | OverInd Bond | | ☐ Surrender the property. | ■ No | |
| name: | | | Retain the property and redeem it. | _ 140 | |

Part 2: List Your Unexpired Personal Property Leases

continue to pay.

2010 Kia Forte 112000 miles

Cosignor only daughter to

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and enter into a

Retain the property and [explain]:

Codebtor to continue paying

Reaffirmation Agreement.

Describe your unexpired personal property leases

Will the lease be assumed?

☐ Yes

Description of

securing debt:

property

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| Debtor 1 | Nicole Minter | Case number (if known) | |
|---------------------------------------|----------------------|------------------------|------------|
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |

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| Debtor | 1 Nicole Minter | Case number (if known) |
|---------|--|--|
| | | |
| | | |
| | | |
| | | |
| | | |
| Part 3: | Sign Below | |
| | penalty of perjury, I declare that I have indicate y that is subject to an unexpired lease. | ed my intention about any property of my estate that secures a debt and any personal |
| X /s | / Nicole Minter | X |
| Ni | icole Minter | Signature of Debtor 2 |
| Sig | gnature of Debtor 1 | |
| Da | ate September 15, 2016 | Date |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-29481 Doc 1 Filed 09/15/16 Entered 09/15/16 16:22:22 Desc Main Document Page 47 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | e Nicole Minter | Case No. | |
|-------|---|---|--------------------------------------|
| | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSATION OF ATT | ORNEY FOR D | EBTOR(S) |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the accompensation paid to me within one year before the filing of the petition in bankrup be rendered on behalf of the debtor(s) in contemplation of or in connection with the | otcy, or agreed to be paid | d to me, for services rendered or to |
| | For legal services, I have agreed to accept | \$ | 940.00 |
| | Prior to the filing of this statement I have received | \$ | 90.00 |
| | Balance Due | \$ | 850.00 |
| 2. | \$_335.00 of the filing fee has been paid. | | |
| 3. | The source of the compensation paid to me was: | | |
| | ■ Debtor □ Other (specify): | | |
| 4. | The source of compensation to be paid to me is: | | |
| | ■ Debtor □ Other (specify): | | |
| 5. | ■ I have not agreed to share the above-disclosed compensation with any other per | rson unless they are mer | nbers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation with a person or person copy of the agreement, together with a list of the names of the people sharing in | | |
| 6. | In return for the above-disclosed fee, I have agreed to render legal service for all as | spects of the bankruptcy | case, including: |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in b. Preparation and filing of any petition, schedules, statement of affairs and plan w c. Representation of the debtor at the meeting of creditors and confirmation hearin d. [Other provisions as needed] a. Analysis of the debtor's financial situation, and rendering adpetition in bankruptcy; | rhich may be required; g, and any adjourned he | arings thereof; |
| | b. Preparation and filing of any petition, schedules, statements | of affairs and plan | which may be required; |
| | c. Representation of the debtor at the meeting of creditors and thereof; $ \\$ | confirmation hearin | g, and any adjourned hearings |
| 7. | By agreement with the debtor(s), the above-disclosed fee does not include the followa. Representation of the debtors in any dischargeability action proceeding. | | ances, or any other adversary |
| | b. Debtor is responsible for the 2 mandatory credit counseling | classes. | |
| | c. This fee agreement does not include representation in motion | ons to redeem. | |

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| In re | Nicole Minter | Case No. | |
|-------|---------------|----------|--|
| | Debtor(s) | | |

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

| | CERTIFICATION |
|--|--|
| I certify that the foregoing is a complete statement this bankruptcy proceeding. | of any agreement or arrangement for payment to me for representation of the debtor(s) in |
| September 15, 2016 Date | /s/ Julie Gleason Julie Gleason 6273536 Signature of Attorney Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602 (312) 578-9530 Fax: (312) 578-9524 troy@chicagobk.com Name of law firm |



Chapter 7 Information and Advice

Attorney fees \$940 Court costs \$335 \$1275 total costs

Payment Plan: 3 payments of \$425. If all fees are not paid prior to the filing of your case, you will be asked to sign a post-petition fee agreement for services rendered after the filing of your case.

Fees Cover: Intake appointment with attorney, petition preparation, representation at your first meeting of creditors, answering creditor calls and requests.

FEES DO NOT COVER: Credit counseling - there are 2 MANDATORY CLASSES. Additional litigation for adversaries, redemptions, defense of motions brought on behalf of a creditor or a trustee, or conversion of a chapter 7 to a chapter 13. You will be charged \$30 to add any creditors after the case is filed. You will be charged \$100 for us to attend a second meeting of creditors if you miss your first meeting. If your case is closed for failure to take the second class, the court will require you to pay \$260 to reopen the case. Initial here: I understand it is the policy of Gleason and Gleason that I am required to take my second class between case filling and my first 341 meeting of creditors. I understand that If my case closes without discharge and my certificate is dated after the first 341 meeting of creditors it is my responsibility to pay \$260 to reopen it.

Typical dischargeable debts: credit cards, medical bills) utilities, unsecured judgments repossessions, personal loans, payday Loans

Non dischargeable debts: Alimony, child support, debts owed under a divorce decree, student loans, traffic tickets, parkiy

Non dischargeable debts: Alimony, child support, debts owed under a divorce decree, student loans, traffic tickets, parking tickets, fines, criminal restitution, debt for personal injury or death related to a DUI, overpayment of government benefits, taxes. Co-signors are still responsible for debts. Credit card charges over \$500 in the last 90 days and cash advances over \$750 in the last 70 days may not be discharged.

Secured Loans Surrendering: (House|Car|Furniture|Jewelry) If you are surrendering a car or a house you are still responsible for tickets, code violations, HOA Fees etc until ownership\title is transferred - usually through a sale, like an auction of the car or house. Title is not transferred through the bankruptcy process. You will be responsible for utilities if not disconnected. Loans through municipal credit unions may be secured by pensions. Credit union loans may be cross collateralized with other credit union loans.

Secured Loans Keeping: Initial here: _____ I understand I must continue to make regular payments on all secured loans I am keeping. I may have to mail in payments as auto debit and check by phone may be disabled until a debt is reaffirmed. I understand I am required to maintain insurance. I understand that if I am keeping a property I must pay all mortgages including but not limited to 2nd mortgages and home equity lines of credit.

Payday Loans | Autodebits | Post dated checks: You must stop them with your bank. It may require closing the bank account.

Utilities: If you bankrupt your utilities they are allowed to charge a deposit for future service and you must pay for any service used after your filing date forward. If you bankrupt a phone or cellular service they may discontinue service.

Credit reporting: We pull credit reports from Transunion and Experian. We cannot guarantee the accuracy or completeness of the reports. Some creditors do not report to credit bureaus. It is your responsibility to review the report and inform us of any missing bills

Gleason and Gleason does not perform and this contract does not include any services relating to credit repair or correcting inaccurate credit reports. Credit bureaus may or may not report information regarding payments on cars or real estate you are keeping.

Clients agree that they have received the following documents: copy of this retainer agreement, list of required items to file bankruptcy, debtor's duties as required under sec. 521, notice required by sec 527(a)(2), notice required by sec 527(b). Checks may be deposited electronically. Client agrees to pay reasonable attorney fees if collections become necessary.

Refund Policy: If Client wants to terminate Gleason and Gleason, Client thust notify Gleason and Gleason in writing. Gleason and Gleason will then perform an accounting of time and services performed and issue a refund neck (if applicable) within a reasonable time. For the purpose of determining the refund due, Gleason and Gleason's current hourly rate is \$300 an hour for attorney time.

Joint Client:



MANDATORY CREDIT CLASSES

ONLINE WWW.SUMMITFE.ORG

- FIRST CLASS BEFORE YOUR CASE CAN BE FILED \$9.95
 - PICK THE CHEAPEST OPTION (\$9.95)
 - -WHEN IT ASKS YOU TO UPGRADE CLICK "NO THANKS".
 - -CREATE ACCOUNT/ENTER YOUR LAWYERS NAME
 - -TAKE READING PORTION OF CLASS
 - PAY FOR CLASS
 - -AFTER YOU PAY FOR THE CLASS YOU MUST COMPLETE THE CHAT PORTION OF THE CLASS FOR A CERTIFICATE TO BE ISSUED.
 - -THEY WILL AUTOMATICALLY SEND US A COPY OF THE CERTIFICATE TO YOU AND GLEASON.
- SECOND CLASS \$7.95 TAKE THIS CLASS AFTER YOUR CASE IS FILED AND YOU RECEIVE A CASE NUMBER
 - -PICK THE CHEAPEST (\$7.95 CLASS)
 - -COMPLETE CLASS
 - -THEY WILL AUTOMATICALLY FILE CERTIFICATE WITH THE COURT AND EMAIL A COPY OF THE CERTIFICATE TO YOU AND GLEASON AND GLEASON



Chapter 7 Bankruptcy Retainer Agreement

THE UNDERSIGNED CLIENT(S) EMPLOYS AND RETAINS GLEASON AND GLEASON, HEREINAFTER, ATTORNEY TO REPRESENT CLIENT(S) IN FILING A VOLUNTARY CHAPTER 7 BANKRUPTCY PETITION

THE PRE-PETITION SERVICES ATTORNEY WILL PROVIDE ARE CONSULTATION AND ADVICE, CONTACT AND COMMUNICATION WITH CREDITORS, PREPARATION OF THE BANKRUPTCY PETITION, SCHEDULES, STATEMENT OF FINANCIAL AFFAIRS, STATEMENT OF SOCIAL SECURITY NUMBER, MEANS TEST. CLIENT UNDERSTANDS THAT HE/SHE/THEY ARE SOLEY RESPONSIBLE FOR COMPLETING PRE-FILING CREDIT COUNSELING AND MUST OBTAIN A CERTIFICATE WHICH MUST BE FILED WITH THE COURT AT THE TIME OF FILING HIS/HER/THEIR PETITION. CLIENT IS RESPONSIBLE FOR ALL COSTS ASSOCIATED WITH SAID COUNSELING.

THE EARNED FEE FOR THE PREPETITION SERVICE IS \$ 90

| FILING FEE OF \$ <u>335.00</u> |
|--|
| TOTAL OF PREPETITION SERVICE AND FILING FEE (PAYABLE TO GLEASON AND GLEASON): \$ 42-5 |
| RETAINED WITH (CASK CHECK DEBIT MONEY ORDER) \$ 425 |
| BALANCE DUE FOR PRE-PETITION ATTORNEY FEES AND FILING FEE \$ |
| AFTER THE BANKRUPTCY CASE IS FILED I UNDERSTAND THAT I WILL BE PRESENTED WITH A SECOND RETAINER AGREEMENT TO PAY GLEASON AND GLEASON ATTORNEY FEES OF \$ 6 5 5 6 FOR POST FILING LEGAL SERVICES AND HAVE BEEN GIVEN A COPY OF THE PROPOSED AGREEMENT. |
| CLIENT UNDERSTANDS THAT ONCE THE BANKRUPTCY CASE IS FILED THEY WILL NOT BE LEGALLY OBLIGATED FOR ANY OTHER FEES UNLESS AND UNTIL THEY ENTER INTO A SECOND RETAINER AGREEMENT PROMISING TO PAY FEES FOR THE REMAINDER OF MY REPRESENTION IN THIS CASE. CLIENT UNDERSTANDS THAT THEY ARE NOT OBLIGATED TO ENTER INTO AND MAY REFUSE TO SIGN THE SECOND RETAINER AGREEMENT. HOWEVER, GLEASON AND GLEASON RESERVES HE RIGHT TO WITHDRAW FROM REPRESENTATION IN THE EVENT THAT I DO NOT SIGN A SECOND RETAINER WITHIN 10 DAYS OF THE FILING OF MY CASE. CLIENT MAY SEEK OTHER LEGAL COUNSEL IF THEY DO NOT WISH TO BE REPRESENTED BY GLEASON AND GLEASON. |
| I UNDERSTAND THAT FEES PAID OR TO BE PAID ARE A FLAT FEE WHICH SHALL IMMEDIATELY BECOME PROPERTY OF GLEASON AND GLEASON IN AN EXCHANGE FOR A COMMITMENT BY GLEASON AND GLEASON TO PROVIDE LEGAL SERVICES. FUNDS WILL BE DEPOSITED INTO THE MAIN BANK ACCOUNT AND USED FOR GENERAL EXPENSES OF GLEASON AND GLEASON. |
| LOCAL RULE 2091-1 (B) DISCLOSURE WITHDRAWAL DDITTON, AND SUBSTITUTION OF COUNSEL |
| FAILURE TO PAY - IN A CASE UNDER CHAPTER 7 OF THE BANKRUPTCY CODE, INCLUDING A CASE CONVERTED FROM CHAPTER 13, WHERE (1) THE DEBTOR'S ATTORNEY HAS AGREED TO REPRESENT THE DEBTOR CONDITIONED ON THE DEBTOR ENTERING INTO AN AGREEMENT AFTER THE FILING OF THE CASE TO PAY THE ATTORNEY FOR SERVICES RENDERED AFTER THE FILING OF THE CASE AND (2) THE DEBTOR REFUSES TO ENTER (NTO SUCH AN AGREEMENT, THE COURT MAY ALLOWETE ATTORNEY TO WITHDRAW FROM REPRESENTATION OF THE DEBTOR ON MOTION OF THE ATTORNEY. |
| DATE CLIENT SQUARE NICOTORNEY MANS |
| JOINT CLIENT |

77 W WASHINGTON, STE 1218 CHICAGO, IL 60602 | (312) 445-8825 | CHILAWYERS.COM | DUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

Afni, Inc. Po Box 3097 Bloomington, IL 61702

Bell Subrogation Services PO Box 24538 Tampa, FL 33623

Chase Mtg Po Box 24696 Columbus, OH 43224

Comenity Bank/nwyrk&co 220 W Schrock Rd Westerville, OH 43081

Diversified Consultant 10550 Deerwood Park Blvd Jacksonville, FL 32256

Enhanced Recovery Co L Po Box 57547 Jacksonville, FL 32241

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Overlnd Bond 4701 W Fullerton Chicago, IL 60639 Peoples Engy 200 East Randolph Chicago, IL 60601

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161

Transworld Systems 507 prudential Rd. Horsham, PA 19044

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United States Bankruptcy Court Northern District of Illinois

| In re | Nicole Minter | | Case No | |
|-------|---|---------------------------|--------------|----|
| | | Debtor(s) | Chapter 7 | |
| | VF | ERIFICATION OF CREDITOR N | IATRIX | |
| | | Number of | f Creditors: | 15 |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | |
| | | | | |